	PATEŇT A	PPLICATIO Effecti		09	(D)	38011	)					
CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL EI	YTITY	OR	OTHER SMALL E	
TOTAL CLAIMS								RATE	FEE		RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FEE	355.00	OR	Basic Fee	710.00
TOTAL CHARGEABLE CLAIMS			L+5 min	us 20=	. '9?			X\$ 9=		OR	X\$18=	450
INDEPENDENT CLAIMS			minus 3 =		· 2			X40=		OR	X80=	1100
MU	LTIPLE DEPEN	DENT CLAIM PI	RESENT					+135=		OR	+270=	
* If the difference in column 1 is less than zero, enter "0" in column 2						l	TOTAL		OR	TOTAL	137:	
	CI					OTHER	THAN					
(Column 1) (Column 2) (Column 3)								SMALL		OR	SMALL	
ENT A		CLAIMS REMAINING AFTER AMENDMENT		NUM PREVI	BER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
AMENDMENT	Total	· 45	Minus	٠. ر	15	= /		X\$ 9=		OR	X\$18=	
AME	Independent	• 5	Minus	***	5	-		X40=		OR	X80=	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								+135=		OR	+270=	
							٠	YOYAL ADDIT, FEE		OR	TOTAL ADDIT, FEE	
		(Column 1)		(Colu	mn 2)	(Column 3)		ADDII. FEL	<u> </u>	•	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
ENT B		CLAIMS REMAINING AFTER AMENDMENT		NUA PREVI	HEST 186ER OUSLY FOR	PRÉSENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
AMENDMENT	Total	· 38	Minus	٠٠ ک	15	• /		X\$ 9=	·	OR	X\$18=	
AME	Independent	· 4	Minus	***	5	=		X40=		ÖR	X80=	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								+135=		OR	+270=	
	1260	W						TOYAL ADDIT. FEE		OR	ADDIT. FEE	
		(Column 1)	the things are taking as our		mn 2)	(Column 3)						
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		NUA PREVI	HEST MBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	.38	Minus	.4	5	•		X\$ 9=		OR	X\$18=	
	Independent	. 4	Minus	•••	5	= /		X40=		OR	X80=	
L	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							A135-			+270=	
* If the entry in column 1 is less than the entry in column 2, write "O" in column 3.  ** If the "Highest Number Previously Paid For" (N THIS SPACE is less than 2, enter "20.*  *** The "Highest Number Previously Paid For" (Total or Independent) is the highest number tound in the appropriate box in column 1.												

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Application or Docket Number